

## FITNESS MOM® STUDIO ADULT APPLICATION

**Name**

**Address**

**Home Telephone**

**Work Address**

**Occupation**

**Business and Cell Phones**

**E-mail**

**Emergency Contact Name/Relationship and Phone Number(s)**

**Physician's Name and Telephone**

**Medical Conditions/Allergies**

**FITNESS PARTICIPATION WAIVER:** By signing the document below, I acknowledge that I have been informed of the need to obtain a physician's examination and approval prior to beginning this exercise program. I fully understand that the program is highly strenuous and choose to participate completely voluntarily. I accept all responsibility for my health and any resultant injury or mishap that may affect my well-being or health in any way. I hold harmless of any responsibility the instructor, the facility, or any persons involved in this program.

**Print Name**

**Sign Name\_**

**Date:**

## **ADULT HEALTH QUESTIONNAIRE**

**NAME**

**DATE**

### **MEDICAL HISTORY:**

**Do you now have or have you ever had a history or experience with any of the following:**

- fl High or Low Blood Pressure**
- fl Elevated Blood Cholesterol**
- fl Diabetes**
- fl Chest Pain**
- fl Family History of Heart Disease**
- fl Joint Problems**
- fl Asthma or Respiratory Problems**
- fl Severe Headaches or Dizziness**
- fl Musculo-skeletal Problems or Disorders**
- fl Neurological Problems or Disorders**
- fl Recent Surgeries**
- fl Any Sustained Injuries or Illnesses**
- fl Epilepsy**
- fl Arthritis**
- fl Exercising Difficulty**
- fl Current Medications, Vitamins, Supplements**
- fl Allergies**
- fl All Other Medical Issues or Concerns**

**Have you received medical clearance from your Physician? Yes/No**

## ADULT AND TEEN EVENING CLASSES

### MONDAY

6:00 – 7:00 PM STRENGTH/CORE TRAINING – ALL LEVELS

7:00 – 8:00 PM MUAY THAI CARDBOXING

### TUESDAY

6:30 – 8:00 PM MIKE'S DOJO JUDO

### WEDNESDAY

6:00 – 7:00 PM STRENGTH/CORE TRAINING – ALL LEVELS

### THURSDAY

6:30 – 8:00 PM MIKE'S DOJO JUDO

### FRIDAY

6:00 – 7:00 PM MUAY THAI CARDBOXING

### SATURDAY

9:00 – 9:40 AM MARTIAL ARTS – AGES 3 YEARS AND OVER

ALL CLASSES ARE SUBJECT TO HOLIDAYS, WEATHER –  
RELATED CANCELLATION AND CHANGES...CALL TO

CONFIRM (508) 336-0123

ADULTS: \$59/MONTH

TEENS \$39/MONTH

SATURDAY CLASS \$39/MONTH

*MAT FEE \$10*